

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 10  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 02 / 13 / 2016	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 1967.92	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48359
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		4181.83	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 8092.96	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48360
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate MARK L PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		17197.54	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10060.88
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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02 / 13 / 2016

Signature

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Form/Schedule: SE

Transaction ID : SE.48359

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$555.73 ON 6/22/2014; \$425.08 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$987.11 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

Form/Schedule: SE

Transaction ID: SE.48360

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$2,285.41 ON 6/22/2014; \$1,748.11 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$8,092.96 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 10  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 02 / 13 / 2016	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 14500.13	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48361
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate MARK E UDALL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 30812.77		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 12636.82	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48362
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 26853.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	27136.95
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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SCOTT B MACKENZIE

[Electronically Filed]

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02 / 13 / 2016

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Form/Schedule: SE

Transaction ID : SE.48361

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$4,094.76 ON 6/22/2014; \$3,132.08 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$14,500.13 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

Form/Schedule: SE

Transaction ID: SE.48362

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$3,568.57 ON 6/22/2014; \$2,729.60 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$12,636.82 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 02 / 13 / 2016	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 14898.87	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48363
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate AL FRANKEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought 31660.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 2846.41	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48364
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate JOHN E WALSH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 6048.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	17745.28
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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SCOTT B MACKENZIE

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02 / 13 / 2016

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Form/Schedule: SE

Transaction ID : SE.48363

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$4,207.36 ON 6/22/2014; \$3,218.21 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$14,898.87 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

Form/Schedule: SE

Transaction ID: SE.48364

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$803.81 ON 6/22/2014; \$614.83 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$2,846.41 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 02 / 13 / 2016	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 3785.95	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48365
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate JEANNE SHAHEEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 8045.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 27207.13	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48366
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 57815.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	30993.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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02 / 13 / 2016

Signature

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Form/Schedule: SE

Transaction ID : SE.48365

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$1,069.13 ON 6/22/2014; \$817.78 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$3,785.95 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

Form/Schedule: SE

Transaction ID: SE.48366

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$7,683.15 ON 6/22/2014; \$5,876.84 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$27,207.13 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 9 OF 10  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 02 / 13 / 2016	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 11053.66	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48367
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate JEFFREY A MERKLEY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 23489.02		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 20 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 23010.16	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48368
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT FEW WEEKS		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2014
Name of Federal Candidate MARK J WARNER		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 48896.59		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	34063.82
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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02 / 13 / 2016

Signature

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Form/Schedule: SE

Transaction ID : SE.48367

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$3,121.50 ON 6/22/2014; \$2,387.63 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$11,053.66 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.

Form/Schedule: SE

Transaction ID: SE.48368

THIS EXPENDITURE WAS PAID IN TWO (2) DISBURSEMENTS OF: \$6,497.95 ON 6/22/2014; \$4,970.28 ON 6/30/2014; AND THE PROJECTED BALANCE OF \$23,010.16 WAS NIETHER DISBURSED NOR INVOICED AT THE CLOSE OF THE REPORTING PERIOD.